Date

November 12, 2004

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Express Mail Label No. EV375956115US		1				PTO/S	SB/17 (10-03
				U.S. Pati	A ent and Trac	pproved for use through 7/31/2006 emark Office; U.S. DEPARTMENT	. OMB 0651
Under the Paperwork Reduction Act of 1995, no persons ar	re requir	ed to res	pond to	a collec	tion of infor	nation unless it displays a valid ON	1B control nu
FEE TRANSMITTAL		Complete if Known					
INANSIMIT IAL	•	Application Number			er	09/436,620	
	:::	Filing Date , First Named Inventor				November 9, 1999 Bruce E. JOHNSON	
<b>/</b>					ntor		
Effective 10/01/2004. Patent fees are subject to annual revision.		Exam	iner N	er Name		Dimitry Levitan	
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				2662	
TOTAL AMOUNT OF PAYMENT (\$) 1770.00		Attorney Docket No.			<u>.                                    </u>	491442004600	
METHOD OF PAYMENT (check all that apply)	T	FEE CALCULATION (continued)					
Credit Money	+	4 D D I T I				ATTON (continued)	
Check Card Order Other None	3. /	ADDITIO	ONAL	. FEES			
X Deposit Account:	1						
Deposit Account 03-1952	Larg Fee	Large Entity Small Entity Fee Fee Fee Fee					
Number	Code	Fee (\$)	Fee Code			Fee Description	Fee Paid
Deposit Account Morrison & Foerster LLP	1051	130	2051	65	Surcharge -	- late filing fee or oath	
Name The Director is authorized to: (check all that apply)	1052	. 50	2052	25	Surcharge -	- late provisional filing fee or cover	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130		n specification	<del>                                     </del>
					ū	,	<b></b>
Charge any additional fee(s) or any underpayment of fee(s) required under 37 CFR 1.16 and 1.17	1812	2,520	1812			equest for ex parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804	·-920*	1804	920*	Requesting Examiner a	publication of SIR prior to ction	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner a	publication of SIR after	
FEE CALCULATION	1251	110	2251	55		ction or reply within first month	$\vdash \vdash \vdash$
1. BASIC FILING FEE	1252		2252			or reply within second month	
Large Entity Small Entity	1253	1	2253	490	Extension f	or reply within third month	980.00
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,530	2254	765	Extension f	or reply within fourth month	
1001 790 2001 395 Utility filing fee	1255	2,080	2255	1,040	Extension f	or reply within fifth month	
1002 350 2002 175 Design filing fee	1401	340	2401	165	Notice of A	ppeal	
1003 550 2003 275 Plant filing fee	1402	330	2402	165	Filing a brie	f in support of an appeal	
1004 790 2004 395 Reissue filing fee	1403	290	2403	145	Request for	oral hearing	
1005 160 2005 80 Provisional filing fee	1451		1451	•		nstitute a public use proceeding	<b></b>
SUBTOTAL (1) (\$) 0	1452		2452			evive – unavoidable	
EVERA CLAIM EFFO FOR LITH TWAND DESCRIP	1453 1501	•	2453 2501			evive - unintentional fee (or reissue)	$\vdash$
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE  Extra Fee from	1502				•	,	
Claims below Fee Paid			2502		Design issue		
- 20	1503 1460		2503 1460		Plant issue	tee the Commissioner	
Claims							
Multiple Dependent 300 =	1807		1807		_	fee under 37 CFR 1.17(q)	
Large Entity   Small Entity   Fee	1806	180	1806		-	of Information Disclosure Stmt each patent assignment per	<b></b>
Fee Fee Fee Code (\$) Fee Description	8021	. 40	8021	40	property (tir	nes number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	790	2809	395	Filing a sub (37 CFR 1.	mission after final rejection	
1201 88 2201 44 Independent claims in excess of 3	1810	790	2810	395	For each a	dditional invention to be	<del></del>
1203 300 2203 150 Multiple dependent claim, if not paid	1				•	37CFR 1.129(b))	700.00
1204 88 2204 44 ** Reissue independent claims over original patent	1801		2801		•	r Continued Examination (RCE) r expedited examination	790.00
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		of a design application					
<u> </u>	1	fee (spe	•		- D-11	CUDTOTAL (6) (6)	4770 77
SUBTOTAL (2) (\$) 0  **or number previously paid, if greater; For Reissues, see above	*Red	luced by	Basic F	iing Fee	e Paid	SUBTOTAL (3) (\$)	1770.00
SUBMITTED BY	<u> </u>					(Complete (if applicable))	-
	Reais						)
Name (Print/Type) Glenn M. Kubota		nev/Agent		14,197	•	Telephone (213) 892-5752	<u> </u>

Signature